00			U.S. Patent an	Approved	d for use through 7 Office; U.S. DEPA	PTO/SB/22 (08-03 7/31/2006. OMB 0651-003 RTMENT OF COMMERC!	
F	PETITION FOR EXTENSION OF		respond to a collecti	on of information	on unless if displays ocket No. (Opti	a valid OMB control number onal)	
ŀ	In re Application of Mühlradt <i>et al.</i>						
l		Application Number			Filed		
l		09/716,778			November 20, 2000		
		For: USE OF LIPOPEPTIDES OR LIPOPROTEINS FOR WOUND TREATMENT					
		Art Unit	1614	Exami	ner N	Maury Audet	
	This is a request under the provisions identified application.	of 37 CFR 1.136	(a) to extend the	e period for	r filing a reply i	n the above	
l	The requested extension and appropriate non-small-entity fee are as follows (check time period desired):						
l	One month (37 CFR 1.17(a)(1))				\$	<del></del>	
l	Two months (37 CFR 1.17(a)(2))				\$		
l	x Three months (37 CFR 1.17(a)(3))					950.00	
ļ	Four months (37 CFR 1.17(a)(4))					<del></del>	
١	Five months (37 CFR 1.17(a)(5))  Applicant claims small entity status. See 37 CFR 1.27. Therefore, the				\$	···	
	reduced by one-half, and the real x A check in the amount of the fellow Payment by credit card. Form	esulting fee is: \$ ee is enclosed. PTO-2038 is atta	ched.	·			
	The Director has already been authorized to charge fees in this application to a Deposit Account.  The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number						
	x attorney or agent of	•			3,363		
attorney or agent under 37 CFR 1.34(a).  Registration number if acting under 37 CFR 1.34(a)  December 30, 2003  Date  Signature						1	
						<u>.                                    </u>	
	(312) 474-6300 Nabeela R. McMillian						
	Telephone Number  Typed or printed name  NOTE: Signatures of all the inventors or assigness of record of the acting interact or their corresponds type (a) are required. Submit outline forms						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below						it multiple forms if more	
	Total of 1	forms are submitt	ed.				
ſĨ	I hereby certify that this correspondence is b	eing deposited with t	the U.S. Postal Ser	vice with suff	içient postage as	First Class Mail, in	
	an envelope addressed to: Commissioner for Dated: December 30, 2003	or Patents, P.O. Box	1450, Alexandria,	va 23843-11 22 18 10	150 on the date s	hown below.	